

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

Small PHA Plan Update
Annual Plan for Fiscal Year: **2003**

FINAL

Erin Housing Authority
Rt. 3 Box 135, Knight Street
Erin, TN 37061

TN074v01

**NOTE: THIS PHA PLAN TEMPLATE (HUD 50075) IS TO BE COMPLETED IN
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

PHA Plan Agency Identification

PHA Name: **Erin Housing Authority**

PHA Number: **TN074**

PHA Fiscal Year Beginning:(mm/yyyy) **10/01/03**

PHA Plan Contact Information:

Name: **Melinda Deason, Executive Director**

Phone: **931-289-4261**

TDD:

Email(if available): **erinha@peoplestel.net**

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting:
(select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ Main administrative office of the local, county or State government
- ☐ Public library
- ☐ PHA website
- ☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA
- ☐ PHA development management offices
- ☐ Other (list below)

PHA Programs Administered :

- ☐ Public Housing and Section 8 ☐ Section 8 Only ☒ Public Housing Only

Annual PHA Plan
Fiscal Year 20 03
 [24CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the filename in parentheses in the space to the right of the title.

Contents	<u>Page#</u>
Annual Plan	
i. Executive Summary (optional)	2
ii. Annual Plan Information	2
iii. Table of Contents	1
1. Description of Policy and Program Changes for the Upcoming Fiscal Year	2
2. Capital Improvement Needs	2
3. Demolition and Disposition	2
4. Homeownership: Voucher Homeownership Program	3
5. Crime and Safety: PHDEP Plan	4
6. Other Information:	4
A. Resident Advisory Board Consultation Process	4
B. Statement of Consistency with Consolidated Plan	5
C. Criteria for Substantial Deviations and Significant Amendments	6
Attachments	
<input checked="" type="checkbox"/> Attachment A : Supporting Documents Available for Review	
<input checked="" type="checkbox"/> Attachment B : Capital Fund Program Annual Statement	
<input checked="" type="checkbox"/> Attachment C : Capital Fund Program 5 Year Action Plan	
<input type="checkbox"/> Attachment__: Capital Fund Program Replacement Housing Factor Annual Statement	
<input type="checkbox"/> Attachment__: Public Housing Drug Elimination Program (PHDEP) Plan	
<input checked="" type="checkbox"/> Attachment F : Resident Membership on PHA Board or Governing Body	
<input checked="" type="checkbox"/> Attachment G : Membership of Resident Advisory Board or Boards	
<input type="checkbox"/> Attachment__: Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text)	
<input checked="" type="checkbox"/> Other (List below, providing each attachment name)	
Attachment D - Performance and Evaluation Report-2002 CFP	
Attachment E - Performance and Evaluation Report-2001 CFP	
Attachment H - Voluntary Conversion-Initial Assessment	
Attachment I - Deconcentration	
Attachment J - Resident Advisory Board Meeting Comments	
Attachment K - Community Service Requirement	

ii. Executive Summary

[24CFR Part 903.79(r)]

At PHA option, provide a brief overview of the information in the Annual Plan

Not Required

1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

No significant changes are proposed.

2. Capital Improvement Needs

[24CFR Part 903.79(g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. ☒ Yes ☐ No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ 93,927.00C. ☒ Yes ☐ No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

D. Capital Fund Program Grant Submissions

(1) Capital Fund Program 5 - Year Action PlanThe Capital Fund Program 5 - Year Action Plan is provided as Attachment **C****(2) Capital Fund Program Annual Statement**The Capital Fund Program Annual Statement is provided as Attachment **B****3.D Demolition and Disposition**

[24CFR Part 903.79(h)]

Applicability: Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to next component; if "yes", complete one activity description for each development.)

2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)	
1a. Development name: 1b. Development (project) number:	
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>	
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>	
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)	
5. Number of units affected:	
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development	
7. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for units <input type="checkbox"/> Public housing for units <input type="checkbox"/> Preference for admission to other public housing or section 8 <input type="checkbox"/> Other housing for units (describe below)	
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:	

4. Voucher Homeownership Program

[24C FR Part 903.79(k)]

- A. ☐ Yes ☒ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to next component; if "yes", describe each program using the table below (copy and complete questions for each program identified.)

B. Capacity of the PHA to Administer a Section 8 Homeownership Program

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- ☐ Establishing a minimum homeowner down payment requirement of at least 3 percent and requiring that at least 1 percent of the down payment comes from the family's resources
- ☐ Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards
- ☐ Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

5. Safety and Crime Prevention: PHDEP Plan

[24 CFR Part 903.7(m)]

Exemptions Section 8 Only PHAs may skip to the next component PHA eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

A. ☐ Yes ☒ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year?
\$ _____ **Not Applicable**

C. ☐ Yes ☐ No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component. **Not Applicable**

D. ☐ Yes ☐ No: The PHDEP Plan is attached at Attachment ____ **Not Applicable**

6. Other Information

[24 CFR Part 903.79(r)]

A. Resident Advisory Board (RAB) Recommendations and PHA Response

1. ☒ Yes ☐ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If yes, the comments are attached at Attachment (Filename) **ATTACHMENT J**

3. In what manner did the PHA address those comments? (select all that apply)

- ☐ The PHA changed portions of the PHA Plan in response to comments. A list of these changes is included
☐ Yes ☐ No: below or
☐ Yes ☐ No: at the end of the RAB Comments in Attachment ____.
- ☒ Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the end of the RAB Comments in Attachment J .
- ☐ Other: (list below)

B. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: (provide name here)

Tennessee Housing and Development Agency

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- ☒ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- ☐ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- ☒ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- ☐ Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)
- ☐ Other: (list below)

3. PHA Requests for support from the Consolidated Plan Agency

- ☐ Yes ☒ No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below) **Not Applicable**

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan:

PHA's definition of "Significant Amendment or Substantial Deviation" from its 5-Year and Annual Plans:

1. Changes to rent or admissions policies or organization of the waiting list.
2. Addition of non-emergency work, items (items not included in the Annual Statement or 5 Year Action Plan) or a change in the use of replacement reserve funds under the Capital Fund.
3. Any change with regard to demolition or disposition, designation, or homeownership programs or conversion activities.

An exception to this definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements.

B. Significant Amendment or Modification to the Annual Plan:

PHA's definition of "Significant Amendment or Substantial Deviation" from its 5-Year and Annual Plans:

1. Changes to rent or admissions policies or organization of the waiting list.
2. Addition of non-emergency work, items (items not included in the Annual Statement or 5 Year Action Plan) or a change in the use of replacement reserve funds under the Capital Fund.
3. Any change with regard to demolition or disposition, designation, or homeownership programs or conversion activities.

An exception to this definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements.

Attachment A

Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	PHA Plan Certification of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdiction to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board -approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Any policy governing occupancy of Police Officers in Public Housing <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
X	Schedule of flat rent offered each public housing development <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
X	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
X	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
NA	The HUD -approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
NA	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
NA	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing § 504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH99 -52 (HA).	Annual Plan: Capital Needs
NA	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
NA	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
NA	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
NA	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
NA	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
NA	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
NA	PHDEP-related documentation: <ul style="list-style-type: none"> Baseline law enforcement services for public housing developments assisted under the PHDEP plan; Consortium agreement/s between the PHA participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHA participating in a consortium as specified under 24 CFR 761.15); Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; Coordination with other law enforcement efforts; Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. 	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input type="checkbox"/> check here if included in the public housing A&O Policy	Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
NA	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
X	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

Annual Statement/Performance and Evaluation Report ATTACHMENT B Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary

PHAName: Erin Housing Authority	Grant Type and Number Capital Fund Program: TN43P07450103 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: FY 2003
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☒ Original Annual Statement
 ☐ Reserve for Disasters/Emergencies
 ☐ Revised Annual Statement (revision no:)
☐ Performance and Evaluation Report for Period Ending: **03/30/03**
☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds	\$0.00			
2	1406 Operations	\$14,927.00			
3	1408 Management Improvements	\$0.00			
4	1410 Administration	\$0.00			
5	1411 Audit	\$0.00			
6	1415 Liquidated Damages	\$0.00			
7	1430 Fees and Costs	\$15,000.00			
8	1440 Site Acquisition	\$0.00			
9	1450 Site Improvement	\$35,000.00			
10	1460 Dwelling Structures	\$29,000.00			
11	1465.1 Dwelling Equipment — Nonexpendable	\$0.00			
12	1470 Non Dwelling Structures	\$0.00			
13	1475 Non Dwelling Equipment	\$0.00			
14	1485 Demolition	\$0.00			
15	1490 Replacement Reserve	\$0.00			
16	1492 Moving to Work Demonstration	\$0.00			
17	1495.1 Relocation Costs	\$0.00			
18	1498 Mod Used for Development	\$0.00			
19	1502 Contingency	\$0.00			
20	Amount of Annual Grant: (sum of lines 2 - 19)	\$93,927.00			
21	Amount of line 20 Related to LBP Activities	\$0.00			
22	Amount of line 20 Related to Section 504 Compliance	\$0.00			
23	Amount of line 20 Related to Security	\$0.00			
24	Amount of line 20 Related to Energy Conservation Measure	\$0.00			

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

[illegible]

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

[illegible]

ATTACHMENT C:

Capital Fund Program Five - Year Action Plan					
Part I: Summary					
PHA Name: Erin Housing Authority				<input checked="" type="checkbox"/> Original 5 - Year Plan <input type="checkbox"/> Revision No:	
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2004 PHA FY: 2004	Work Statement for Year 3 FFY Grant: 2005 PHA FY: 2005	Work Statement for Year 4 FFY Grant: 2006 PHA FY: 2006	Work Statement for Year 5 FFY Grant: 2007 PHA FY: 2007
	Annual Statement				
PHA Wide		\$33,927.00	\$28,927.00	\$42,927.00	\$36,427.00
TN074-002		\$30,000.00	\$55,000.00	\$25,000.00	\$50,000.00
TN074-003		\$30,000.00	\$10,000.00	\$26,000.00	\$7,500.00
CFP Funds Listed for 5-year planning		\$93,927.00	\$93,927.00	\$93,927.00	\$93,927.00
Replacement Housing Factor Funds		NA	NA	NA	NA

Capital Fund Program Five - Year Action Plan Part II: Supporting Pages — Work Activities						
Activities for Year 1	Activities for Year: <u>2</u> FFY Grant: 2004 PHAFY: 2004			Activities for Year: <u>3</u> FFY Grant: 2005 PHAFY: 2005		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	PHA Wide	Operations	\$18,927.00	PHA Wide	Operations	\$13,927.00
Annual	PHA Wide	Fees and Costs	\$15,000.00	PHA Wide	Fees and Costs	\$15,000.00
Statement	TN074-002	Roofing	\$30,000.00	TN074-002	Replace soffits/gutters	\$10,000.00
	TN074-003	Roofing	\$30,000.00	TN074-002	Floors (tile/carpet)	\$45,000.00
				TN074-003	Replace soffits/gutters	\$10,000.00
Total CFPEstimated Cost			\$93,927.00			\$93,927.00

Capital Fund Program Five -Year Action Plan

PartII:SupportingPages —WorkActivities

ActivitiesforYear: <u>4</u> FFYGrant: 2006 PHAFY: 2006			ActivitiesforYear: <u>5</u> FFYGrant: 2007 PHAFY: 2007		
Development Name/Number	MajorWorkCategories	EstimatedCost	Development Name/Number	Major WorkCategories	EstimatedCost
PHA Wide	Operations	\$17,927.00	PHA Wide	Operations	\$16,427.00
PHA Wide	Fees and Costs	\$15,000.00	PHA Wide	Fees and Costs	\$15,000.00
PHA Wide	Range and refrigerators (as needed)	\$5,000.00	PHA Wide	Range and Refrigerators	\$5,000.00
PHA Wide	Water heaters	\$5,000.00	TN074-002	Replace 20 bathtubs / fixtures	\$17,000.00
TN074-002	Interior painting	\$7,500.00	TN074-002	Replace Sidewalks	\$7,500.00
TN074-002	Replace 50 interior doors / hardware	\$17,500.00	TN074-003	Replace 30 bathtubs / fixtures	\$25,500.00
TN074-003	Furnaces	\$18,500.00	TN074-003	Replace Sidewalks	\$7,500.00
TN074-003	Interior painting	\$7,500.00			
TotalCFPEstimatedCost		\$93,927.00			\$93,927.00

ATTACHMENT D:

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1:

Summary

PHAName: Erin Housing Authority		Grant Type and Number Capital Fund Program: TN43P07450102 Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: FY 2002	
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report			
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non -CFP Funds	0.00	0.00		
2	1406 Operations	\$13,927.00	\$13,927.00	\$0.00	\$0.00
3	1408 Management Improvements	0.00	0.00		
4	1410 Administration	0.00	0.00		
5	1411 Audit	0.00	0.00		
6	1415 Liquidated Damages	0.00	0.00		
7	1430 Fees and Costs	\$15,000.00	\$15,000.00	\$0.00	\$0.00
8	1440 Site Acquisition	0.00	0.00		
9	1450 Site Improvement	0.00	\$10,000.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$65,000.00	\$55,000.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment — Nonexpendable	0.00	0.00		
12	1470 Non dwelling Structures	0.00	0.00		
13	1475 Non dwelling Equipment	0.00	0.00		
14	1485 Demolition	0.00	0.00		
15	1490 Replacement Reserve	0.00	0.00		
16	1492 Moving to Work Demonstration	0.00	0.00		
17	1495.1 Relocation Costs	0.00	0.00		
18	1498 Mod Used for Development	0.00	0.00		
19	1502 Contingency	0.00	0.00		
20	Amount of Annual Grant: (sum of lines 2-19)	\$93,927.00	\$93,927.00	\$0.00	\$0.00
21	Amount of line 20 Related to LBP Activities	0.00	0.00		
22	Amount of line 20 Related to Section 504 Compliance	0.00	0.00		
23	Amount of line 20 Related to Security	0.00	0.00		
24	Amount of line 20 Related to Energy Conservation Measure	0.00	0.00		

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Erin Housing Authority		Grant Type and Number Capital Fund Program #: TN43P07450102 Capital Fund Program Replacement Housing Factor#:				Federal FY of Grant: FY 2002		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide	Operations	1406		\$13,927.00	\$13,927.00	\$0.00	\$0.00	
PHA Wide	Fees and Costs	1430		\$15,000.00	\$15,000.00	\$0.00	\$0.00	
TN074-002	Kitchen cabinets	1460		\$10,000.00	\$10,000.00	\$0.00	\$0.00	
TN074-002	Backsplashes	1460		\$10,000.00	\$10,000.00	\$0.00	\$0.00	
TN074-002	Range hoods	1460		\$10,000.00	\$10,000.00	\$0.00	\$0.00	
TN074-002	Floor Tile	1460		\$0.00	\$15,000.00	\$0.00	\$0.00	
TN074-002	Bath Vanities	1460		\$0.00	\$10,000.00	\$0.00	\$0.00	
TN074-002	Landscaping	1450		\$0.00	\$5,000.00	\$0.00	\$0.00	
TN074-002	Playground Equipment	1460		\$20,000.00	\$0.00	\$0.00	\$0.00	
TN074-003	Landscaping	1450		\$0.00	\$5,000.00	\$0.00	\$0.00	
TN074-003	Range hoods	1460		\$15,000.00	\$0.00	\$0.00	\$0.00	

ATTACHMENT E:

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Erin Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN43P07450101 Replacement Housing Factor Grant No:			Federal FY of Grant: FFY 2001
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input checked="" type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-CFP Funds	\$0.00	\$0.00	\$0.00	\$0.00
2	1406 Operations	\$12,081.00	\$12,071.90	\$12,071.90	\$12,071.90
3	1408 Management Improvements	\$0.00	\$0.00	\$0.00	\$0.00
4	1410 Administration	\$0.00	\$0.00	\$0.00	\$0.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$15,000.00	\$7,009.10	\$7,009.10	\$7,009.10
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$0.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$73,800.00	\$81,800.00	\$81,800.00	\$81,800.00
11	1465.1 Dwelling Equipment — Nonexpendable	\$0.00	\$0.00	\$0.00	\$0.00
12	1470 Non Dwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Non Dwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00
16	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
17	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00
18	1499 Development Activities	\$0.00	\$0.00	\$0.00	\$0.00
19	1501 Collateralization or Debt Service	\$0.00	\$0.00	\$0.00	\$0.00
20	1502 Contingency	\$0.00	\$0.00	\$0.00	\$0.00
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$100,881.00	\$100,881.00	\$100,881.00	\$100,881.00
22	Amount of line 21 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 21 Related to Section 504 compliance	\$0.00	\$0.00	\$0.00	\$0.00
24	Amount of line 21 Related to Security — Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
25	Amount of line 21 Related to Security — Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
26	Amount of line 21 Related to Energy Conservation	\$0.00	\$0.00	\$0.00	\$0.00

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

[illegible]

Required Attachment F: Resident Member on the PHA Governing Board

1. ☒ Yes ☐ No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board: **Sandra Leaver**

B. How was the resident board member selected: (select one)?

- ☐ Elected
☒ Appointed

C. The term of appointment is (include the date term expires):

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not? **Not Applicable**

- ☐ the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full-time basis
☐ the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.
☐ Other (explain):

B. Date of next term expiration of a governing board member: **Not Applicable**

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): **Not Applicable**

Required Attachment G: Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Pam Miller
Debra Seay
Melony Foster
Dana Shelton
Patti Martin

Attachment H: Voluntary Conversion Initial Assessments

(B) Voluntary Conversion Initial Assessments Assessment Completed in FY 2002

- a. How many of the PHA's developments are subject to the Required Initial Assessments? **2**
- b. How many of the PHA's developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not general occupancy projects)? **0**
- c. How many Assessments were conducted for the PHA's covered developments? **2**
- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments:

Development Name	Number of Units
None	

If the PHA has not completed the Required Initial Assessments, describe the status of these assessments.
Not Applicable

Attachment I - Deconcentration Policy for the Erin Housing Authority

I. DECONCENTRATION POLICY

- A. The objective of the Deconcentration Policy for the Erin Housing Authority (EHA) is to achieve the goal that families are housed in a manner that will prevent a concentration of poverty families and/or a concentration of higher income families in any one development or census tract. The EHA will take actions as necessary to achieve the goal that no individual development has a concentration of higher income or lower income families. To ensure that the EHA does not concentrate families with higher or lower income levels in any one development, the EHA will track the status of family income, by development, on a monthly basis utilizing income reports generated by the EHA's computer system.

- b. The EHA will periodically compare the relative incomes of its developments to the relative incomes of the census tracts in which they are located. Where significant differences are identified, income targeting will be applied.

I. INCOME TARGETING

- a. To accomplish the deconcentration goals, the Erin Housing Authority will take the following actions:
1. At the beginning of each fiscal year the Erin Housing Authority will establish a numerical goal for admission of families whose incomes are at or below 30 percent of the area median income. The target annual goal will be calculated by taking 40 percent of the total number of move-ins from the previous Erin fiscal year.
 2. The EHA will limit the number of admissions to ensure that not less than 40 percent of admissions are families with incomes at or below 30 percent of the area median income.
 3. The EHA will skip families on the waiting list or skip developments to accomplish these goals.

The Erin Housing Authority will not hold units vacant to accomplish these goals.

Admission Policy for Deconcentration

- a. ☒ Yes ☐ No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.
- b. ☐ Yes ☒ No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

If yes, list these developments as follows:

Deconcentration Policy for Covered Developments			
Development Name :	Number of Units	Explanation (if any) [see step 4 at §903.2(c)(1)(iv)]	Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]

Attachment J: Resident Advisory Board Meeting Comments

The Resident Advisory Board reviewed the Agency Plan on July 8, 2003 at a meeting conducted at the Erin Housing Authority.

All components of the agency plan were discussed. The Board is in support of the agency plan, including the proposed capital fund annual budget/work items, and the 5-year capital budget. The Board specifically discussed the EHA's proposed plans to construct playground facilities in both developments. One member requested that the EHA staff consider adding shade trees and/or small canopy for shade. The EHA will consider the suggestion during the design phase of the project. In fact, the EHA will accept additional design comments from the Board at that time.

Attachment K: Community Service Requirement

SERVICE REQUIREMENT

Except for any family who is an exempt individual, each adult resident of public housing must:

- 1.) Contribute 8 hours per month of community service (does not include political activities); or
- 2.) Participate in an economic self-sufficiency program for 8 hours per month; or
- 3.) Perform 8 hours per month of combined community service and economic self-sufficiency.

COVERED RESIDENTS

All public housing residents between the ages of 18 and 62 who are not exempt.

EXEMPT RESIDENTS

Any public housing resident who is:

- 1.) 62 years of age or older
- 2.) Blind or disabled and who certifies that because of this disability she or he is unable to comply with the requirement of the policy;
- 3.) Primary caretaker of a person who is 62 years or older or who is blind or disabled;
- 4.) Engaged in work activities;
- 5.) Engaged in a work activity under the state program funded under Part A of Title IV of the Social Security Act, or any other welfare program of the state, including a state administered welfare-to-work program;
- 6.) Member of a family receiving assistance, benefits or services under a state program funded under Part A of Title IV of the Social Security Act, or under any other welfare program of the state, including a state administered welfare-to-work program and has not been found to be in noncompliance with such a program.

VIOLATION OF SERVICE REQUIREMENT

Violation of the service requirement is grounds for nonrenewal of the twelve (12) month lease agreement, but not for termination of tenancy during the course of the twelve (12) month lease term.

COMMUNITY SERVICE

The performance of volunteer work or duties that are a public benefit, and that serve to improve the quality of life, enhance resident self-sufficiency, or increase resident self-responsibility in the community. Community service is not employment and may not include political activities.

DETERMINING RESIDENT STATUS

Per the Housing Authority's approved Admission and Occupancy Policy (ACOP):

- The status of all applicant members will be determined and families notified during the application process.
- During annual (or every three years for residents paying flat rents) recertifications, the status of each family member will be reviewed and determined,
- Between recertifications, residents are required to notify the Housing Authority within ten days when there is a change in employment, income, family composition or welfare-to-work training or employment activities. The Housing Authority will use this information to determine changes, if any, in family member status.
- Members will be informed verbally and in writing of their community service requirement.

ASSURING RESIDENT COMPLIANCE

The Housing Authority shall review and verify family compliance with service requirements annual at least 30 days before the end of the twelve month lease term. The Housing Authority will retain reasonable documentation of service requirement performance or exemption in resident family files.

If the Housing Authority determines that a covered family member has not complied with their service requirement, the Housing Authority will notify the family of this determination, describe the non-compliance and state the Authority will not renew the lease at the end of the twelve month lease term unless;

- The family member enters into an agreement with the Authority that the noncompliant family member will cure such non-compliance with the twelve month term of the new lease while also satisfying the on-going service requirement.
- Or the family provides written assurance satisfactory to the Authority that the noncompliant family member no longer resides in the unit.

Families may request a grievance hearing on the Authority's determination in accordance with the Authority's approved Grievance Procedure.

SIGNED CERTIFICATIONS

The Authority Director will provide signed certifications of any community service activities administered by the Authority. In a similar manner, organizations other than the Authority who administer qualifying activities must provide certifications. The resident will be given a two part Time sheet with places for Agency and resident to sign. One copy must be for the file in Authority office and the other for the resident to keep.